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\rangle	NAME OF COMMITTEE (In Full) National Emergency Medicine Political Acti												
۹.	Full Name (Last, First, Middle Initial) Freedom and Democracy Fund Mailing Address 610 South Blvd					Date	Transaction ID: 15366394 Date of Disbursement M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
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3.	Mike Thompson For Congress						of D	isburs	ement			_	
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